

HART, BYARS, ENG & O'CONNOR
ACCOUNTANCY CORPORATION • CERTIFIED PUBLIC ACCOUNTANTS
MEMBER OF PRIVATE COMPANIES PRACTICE SECTION OF AMERICAN INSTITUTE OF CPA'S

FEDERAL ELECTION
COMMISSION
9111 P.O. BOX

DEC 9 1 03 PM '96

ACCOUNTANTS' COMPILATION REPORT

FEC FORM 3X - REPORT OF RECEIPTS AND DISBURSEMENTS

To the Officers and Trustees

International Longshoremen's &
Warehousemen's Union - Political
Action Fund

We have compiled the report of receipts and disbursements of

**INTERNATIONAL LONGSHOREMEN'S &
WAREHOUSEMEN'S UNION - POLITICAL
ACTION FUND**

as of November 25, 1996, and the detailed summary page of receipts and disbursements for the forty days ended November 25, 1996 and the period January 1 through November 25, 1996, and the accompanying supplementary information contained in Schedules A, B and E, and Statement 1 which are presented only for supplementary analysis purposes, included in the accompanying prescribed form in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

Our compilation is limited to presenting in the form prescribed by the Federal Election Commission information that is the representation of management. We have not audited or reviewed the financial statements referred to above and, accordingly, do not express an opinion or any other form of assurance on them.

These financial statements, including any related disclosures and supplementary information, are presented in accordance with the requirements of the Federal Election Commission, which differ from generally accepted accounting principles. Accordingly, these financial statements are not designed for those who are not informed about such differences.

*Hart, Byars, Eng & O'Connor
Accountancy Corporation*

December 2, 1996

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR PRINT
TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

DEC 9 1996

1. NAME OF COMMITTEE (In full) INTERNATIONAL LONGSHOREMEN'S AND WAREHOUSEMEN'S UNION - POLITICAL ACTION FUND	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported	
1188 FRANKLIN STREET	
CITY, STATE and ZIP CODE	
SAN FRANCISCO, CA 94109	

2. FEC IDENTIFICATION NUMBER
C00176214

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

Thirteenth day report following the General Election on
November 5th in the State of CA

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/17/96</u> through <u>11/25/96</u>		
6. (a) Cash on Hand January 1, 1996	\$ 16,849	
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,760	
(c) Total Receipts (from Line 1b)	\$ 4,590	\$ 66,954
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(e) for Column B)	\$ 21,350	\$ 83,803
7. Total Disbursements (from Line 3b)	\$ 9,403	\$ 72,052
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 11,747	\$ 11,747
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20460 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Joe Balera

Signature of Treasurer

Date

12/4/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
 PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE INTERNATIONAL LONGSHORSMEN'S AND WORKEERS UNION - POLITICAL ACTION FUND	REPORT COVERING PERIOD	
	FROM 10/17/96	TO 11/25/96
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual Persons Other Than Political Committees		
i. Itemized (use Schedule A)	9,567	66,870
ii. Unitemized 5 E&B STATEMENT NO. 1	9,567	66,870
iii. Total	(add i and ii) >	
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions	(add a, b and c) >	9,567 66,870
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	23	84
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	9,590 66,954
20. Total Federal Receipts	(subtract line 18 from line 19) >	9,590 66,954
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	3,535	12,635
c. Total Operating Expenditures	(add a i, a ii, and b) >	3,535 12,635
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,520	52,600
24. Independent Expenditures (use Schedule E)	568	1,289
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individual Persons Other Than Political Committees	0	17
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds	(add a, b and c) >	0 17
29. Other Disbursements	1,600	5,515
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9,163 72,056
31. Total Federal Disbursements	(subtract line 21 a & b from line 30) >	9,163 72,056
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	9,567	66,954
33. Total Contribution Refunds (from line 28d)	0	17
34. Net Contributions (other than loans)[subtract line 33 from 32]	9,567	66,853
35. Total Federal Operating Expenditures	(add 21 a and 21 b) >	3,535 12,635
36. Offsets to Operating Expenditures (from line 15)		0
37. Net Operating Expenditures	(subtract line 35 from 35) >	3,535 12,635

SEE ACCOUNTANTS' COMPILED REPORT

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF
FOR LINE NUMBER
17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL LONGSHORSEMEN'S AND WAREHOUSEMEN'S UNION - POLITICAL ACTION FUND

A. Full Name, Mailing Address and ZIP Code

BANK OF AMERICA
50 CALIFORNIA STREET 26th FL
SAN FRANCISCO, CA 94111

Name of Employer

INTEREST

Date (month,
day, year)

10/31/96

Amount of Each
Receipt this Period

\$ 23

Receipt For: Primary General Other (specify):

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: Primary General Other (specify):

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: Primary General Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: Primary General Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: Primary General Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: Primary General Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: Primary General Other (specify):

SUBTOTAL of Receipts This Page (optional)

\$ 23

TOTAL This Period (last page this line number only)

\$ 23

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE	OF
1	1
FOR LINE NUMBER	
24 (b)	

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NAME OF COMMITTEE (in Full)

INTERNATIONAL LONGSHORERS AND WAREHOUSEMEN'S UNION - POLITICAL ACTION FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement ACCOUNTING SERVICES	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 3,535
B. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) YTD \$ 2,205	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 3,535

TOTAL This Period (last page this line number only)

\$ 3,535

SEE ACCOUNTANTS' COMPILED REPORT

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE / OF /
FOR LINE NUMBER
23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INTERNATIONAL LONGSHOREMEN'S AND WAREHOUSEMEN'S UNION - POLITICAL ACTION FUND

A. Full Name, Mailing Address and ZIP Code MICHELA ALIOTO FOR CONGRESS 133 JEFFERSON NAPA, CA 94569 TRES: LINDA BLUM 100308403	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 1st Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2,500	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
B. Full Name, Mailing Address and ZIP Code FRIENDS OF GEORGE BROWN, JR. P.O. BOX 1867 COLTON, CA 92324 TRES: M. STAN TOMILSON 100205898	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 42nd Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1,500	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
C. Full Name, Mailing Address and ZIP Code WALTER CAPPS FOR CONGRESS P.O. BOX 91421 SANTA BARBARA, CA 93190 TRES: BRYANT WEINKE 100291731	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 22nd Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1,000	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
D. Full Name, Mailing Address and ZIP Code (PETER) NAVARRO FOR CONGRESS 3610 - 38th STREET NE, #F-270 WASHINGTON, D.C. 20016 TRES: DEANNA LIEBERGOT 100312304	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 49th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1,500	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
E. Full Name, Mailing Address and ZIP Code (NANCY) PELOSI FOR CONGRESS P.O. BOX 422220 SAN FRANCISCO, CA 94142 TRES: PAUL PELOSI 100213512	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 8th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$500	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
F. Full Name, Mailing Address and ZIP Code ELLEN TAUSCHER FOR CONGRESS 1711 ALMOND AVENUE WALNUT GREEK, CA 94596 TRES: SHIRLEY NELSON 100310706	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 10th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$500	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
G. Full Name, Mailing Address and ZIP Code RICK ZBUR FOR CONGRESS P.O. BOX 3798 LONG BEACH, CA 90803 TRES: JULES GLASER 100302356	Purpose of Disbursement CONTRIBUTION TO HOUSE CANDIDATE - CA 38th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1,500	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 500
H. Full Name, Mailing Address and ZIP Code WASHINGTON STATE DEMOCRATIC CENTRAL (COMMITTEE) 916 VICTORY FUND 616 FIRST AVENUE, 6th FLOOR SEATTLE, WA 98104 TRES: NANCY KRAVEM 100114439	Purpose of Disbursement CONTRIBUTIONS WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1,000	Date (month, day, year) 10/29/96	Amount of Each Disbursement This Period \$ 1,000
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			\$ 4,500
TOTAL This Period (last page this line number only)			\$ 4,500

SEE ACCOUNTANTS' COMPILED REPORT

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)

INTERNATIONAL LONGSHOREMEN'S AND WAREHOUSEMEN'S UNION - POLITICAL ACTION FUND

A. Full Name, Mailing Address and ZIP Code COMMITTEE TO ELECT SESS HECKER 1017 DEODAR AVENUE OKLAND, CA 93030 TRES: ANN ROSSER 15-2179	Purpose of Disbursement CONTRIBUTION TO NON-FEDERAL CANDIDATE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD: \$ 3,520	Date (month, day, year) 10/18/96	Amount of Each Disbursement This Period \$ 1,000
	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			\$ 1,000
TOTAL This Period (last page this line number only)			\$ 1,000

SEE ACCOUNTANT'S COMPILED REPORT

ITEMIZED INDEPENDENT EXPENDITURES

Page 1 of 1 Pages

(See Reverse Side for Instructions)

Name of Committee (in Full)

INTERNATIONAL LONGSHOREMEN'S & WAREHOUSEMEN'S UNION - POLITICAL ACTION FUND

Poll Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & offices sought
WEST HAWAII TODAY P.O. BOX 789 KAILUA-KONA, HI 96745	NEWSPAPER ADVERTISING	10/22/96	\$464	PATSY MUNK HOUSE, STATE-HI BILL CLINTON - DC ALBERT DORE - DC <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$ 464	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$ 104	
(c) TOTAL Independent Expenditures				\$ 568

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, collaboration, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the funding of dissemination, distribution, or publication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agents.



Haydee Lind 12/4/96
Signature Date

Declarant and sworn to before me this 4 day of
December in 96

My Commission expires:

6/30/2000

HAYDEE LIND
Comm. # 1103688
NOTARY PUBLIC - CALIFORNIA
City & County of San Francisco
My Comm. Expires June 30, 2000

SEE ACCOUNTANTS' COMPTONIC REPORT

**INTERNATIONAL LONGSHOREMEN'S & WAREHOUSEMEN'S UNION
POLITICAL ACTION FUND**

STATEMENT #1

Monetary contributions received are comprised of individual voluntary contributions from members of the International Longshoremen's & Warehousemen's Union and other individuals which do not exceed a total of \$200.00 during the OCTOBER 17, 1996 to NOVEMBER 25, 1996 reporting period, nor an aggregate of over \$200.00 for the 1996 calendar year.

SEE ACCOUNTANTS' COMPILED REPORT

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

12/15/96

No Postmark

Postmark Illegible

Received from the House Office of Records

DATE OF RECEIPT

and Registration

Received from the Senate Office of Public

DATE OF RECEIPT

Records

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

ASW

DATE PREPARED